IFW

Application Number 10/602,537

Filing Date 06/23/2003

First Named Inventor Hongxing Tang

Art Unit 2822

Examiner Name Mark V. Prenty

Attorney Docket Number 009195-000410US

| To: Commissioner for Patents                                                                                                                               |                                                   |          |                              |  |        |       |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|----------|------------------------------|--|--------|-------|--|--|
| P.O. Box 1450 Alexandria, VA 22313-1450                                                                                                                    |                                                   |          |                              |  |        |       |  |  |
| Please withdraw me as attorney or agent for the above identified patent application, and                                                                   |                                                   |          |                              |  |        |       |  |  |
| all the attorneys/agents of record                                                                                                                         |                                                   |          |                              |  |        |       |  |  |
| all the attorneys/agents (with registration numbers) listed on the attached paper(s), or                                                                   |                                                   |          |                              |  |        |       |  |  |
| all the attorneys/agents associated with Customer Number 20350                                                                                             |                                                   |          |                              |  |        |       |  |  |
| NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.  |                                                   |          |                              |  |        |       |  |  |
| The reasons for this request are: At the request of the client: California Institute of Technology                                                         |                                                   |          |                              |  |        |       |  |  |
|                                                                                                                                                            |                                                   |          |                              |  |        |       |  |  |
| CORRESPONDENCE ADDRESS                                                                                                                                     |                                                   |          |                              |  |        |       |  |  |
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| OR                                                                                                                                                         |                                                   |          |                              |  |        |       |  |  |
| Firm <i>or</i> Individual Name                                                                                                                             | Stephen Maebius                                   |          |                              |  |        |       |  |  |
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| Signature                                                                                                                                                  | GA                                                |          |                              |  | ·      |       |  |  |
| Name Richard T.Vo                                                                                                                                          | Ogawa                                             |          |                              |  | 37,692 |       |  |  |
| Date 1/                                                                                                                                                    | arlan                                             |          | Telephone No. (650) 326-2400 |  |        |       |  |  |
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| DEE 0 2 2004 EV                                          |                          |                                                                                                                                     |  |  |
|----------------------------------------------------------|--------------------------|-------------------------------------------------------------------------------------------------------------------------------------|--|--|
| TRANSMITTAL                                              | Application Number       | 10/447,586;10/603,573; 10/757,973; 10/757,030; 10/802,667; 10/876,276; 10/917,257; 10/974,006; 10/602,537; 10/602,548               |  |  |
| FORM                                                     | Filing Date              | 5/28/2003; 06/24/2003; 01/13/2004; 01/13/2004; 03/16/2004; 06/23/2003; 08/11/2004; 10/25/2004; 06/23/2003; 06/23/2003               |  |  |
| (to be used for all correspondence after initial filing) | First Named Inventor     | Tai; Tai; Xie; Xie; Heath; He; Tai; Tang; Tang                                                                                      |  |  |
| ,                                                        | Art Unit                 | 1765, 1753, 3746, 3754, 2855, 1645, 1723,<br>Unassigned, 2822, 2855                                                                 |  |  |
|                                                          | Examiner Name            | Norton, N.; unassigned; unassigned; unassigned; Martir, L; unassigned; unassigned; unassigned; Prenty, M.; Allen, A.                |  |  |
| Total Number of Pages in This Submission 12              | Attorney Docket Number   | 020859-002310US; -002410US; ; -2510US; -<br>002610US; -002710US; -003710US; -003910US; -<br>004610US;<br>009195-000410US; -000520US |  |  |
| Total Number of Fages III, Fine Custiments.              |                          |                                                                                                                                     |  |  |
| EN                                                       | ICLOSURES (Check all th  | at apply)                                                                                                                           |  |  |
| Fee Transmittal Form                                     | Drawing(s)               | After Allowance Communication to TC                                                                                                 |  |  |
| Fee Attached                                             | Licensing-related Papers | Appeal Communication to Board of Appeals and Interferences                                                                          |  |  |

| Total Number of Pages in This Submission                                                                                                                                                                                                                                                   |   | Attorney Docket Number                                                                                                                                                                                  | 002<br>004 | 859-002310US; -002410US; ; -2510US; -<br>610US; -002710US; -003710US; -003910US; -<br>610US;<br>195-000410US; -000520US                                                                                                                                                                                                                                          |  |  |  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| ENCLOSURES (Check all that apply)                                                                                                                                                                                                                                                          |   |                                                                                                                                                                                                         |            |                                                                                                                                                                                                                                                                                                                                                                  |  |  |  |  |
| Fee Transmittal Form Fee Attached  Amendment/Reply After Final Affidavits/declaration(s)  Extension of Time Request Express Abandonment Request Information Disclosure Statement                                                                                                           |   | Drawing(s)  Licensing-related Papers  Petition  Petition to Convert to a  Provisional Application  Power of Attorney, Revocation  Change of Correspondence Add  Terminal Disclaimer  Request for Refund | iress      | After Allowance Communication to TC  Appeal Communication to Board of Appeals and Interferences  Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  Proprietary Information  Status Letter  Other Enclosure(s) (please identify below):  Return Postcard  Request for Withdrawal as Attorney or Agent & Change of Correspondence Address (10 Pages) |  |  |  |  |
| Certified Copy of Priority Document(s)  Remarks The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.  Reply to Missing Parts/ Incomplete Application  Remarks The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430. |   |                                                                                                                                                                                                         |            |                                                                                                                                                                                                                                                                                                                                                                  |  |  |  |  |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT  Firm Name  Townsend and Townsend and Crew LLP                                                                                                                                                                                                  |   |                                                                                                                                                                                                         |            |                                                                                                                                                                                                                                                                                                                                                                  |  |  |  |  |
| Signature  Printed name                                                                                                                                                                                                                                                                    |   |                                                                                                                                                                                                         |            |                                                                                                                                                                                                                                                                                                                                                                  |  |  |  |  |
| Date Richard T. Ogawa                                                                                                                                                                                                                                                                      | 1 | . Reg. N                                                                                                                                                                                                | lo.        | 37,692                                                                                                                                                                                                                                                                                                                                                           |  |  |  |  |
| CERTIFICATE OF TRANSMISSION/MAILING                                                                                                                                                                                                                                                        |   |                                                                                                                                                                                                         |            |                                                                                                                                                                                                                                                                                                                                                                  |  |  |  |  |
| I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.                    |   |                                                                                                                                                                                                         |            |                                                                                                                                                                                                                                                                                                                                                                  |  |  |  |  |
| Signature                                                                                                                                                                                                                                                                                  |   |                                                                                                                                                                                                         |            |                                                                                                                                                                                                                                                                                                                                                                  |  |  |  |  |
| Typed or printed name Tiffany Wu                                                                                                                                                                                                                                                           |   |                                                                                                                                                                                                         |            | Date 1 29/04                                                                                                                                                                                                                                                                                                                                                     |  |  |  |  |